

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		08/06/00
O.I.P.E. CLASSIFIER		108-10-00	
FORMALITY REVIEW	<i>[Signature]</i>	66959	9-18-00
RESPONSE FORMALITY REVIEW			5-2-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	07	12	04
2	24	19	21
3	03	03	04
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
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If more than 150 claims or 10 actions
staple additional sheet here

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